

Application Data Sheet

Application Information

Application Type::	Regular
Subject Matter::	Utility
Suggested classification::	None
Suggested Group Art Unit::	None
CD-ROM or CD-R?::	None
Title::	BLOOD VOLUME DETERMINATION AND SENSOR CALIBRATION
Attorney Docket Number::	86017.000038
Request for Early Publication?::	No
Request for Non-Publication?::	No
Suggested Drawing Figure::	1
Total Drawing Sheets::	5
Small Entity?::	Yes
Secrecy Order in Parent	
Appl.?::	No

Applicant Information

Applicant Authority Type::	Inventor
Primary Citizenship Country::	US
Status::	Full Capacity
Given Name::	Nikolai
Middle Name::	M.
Family Name::	Krivitski
City of Residence::	Ithaca
State or Province of Residence ::	NY

Country of Residence:: US
Street of mailing address:: 34 Dutch Mill Road
City of mailing address:: Ithaca
State or Province of mailing address:: NY
Country of mailing address:: US
Postal or Zip Code of mailing address:: 14850

Applicant Authority Type:: Inventor
Primary Citizenship Country:: RU (Russian Federation)
Status:: Full Capacity
Given Name:: Dimitry
Middle Name:: M.
Family Name:: Starostin
City of Residence:: Ithaca
State or Province of Residence:: NY
Country of Residence:: US
Street of mailing address:: 34 Old Dutch Road
City of mailing address:: Ithaca
State or Province of mailing address:: NY
Country of mailing address:: US
Postal or Zip Code of mailing address:: 14850

Correspondence Information

Correspondence Customer

Number:: 23387

Name::

Street of mailing address::

City of mailing address::

**State or Province of mailing
address::**

**Postal or Zip Code of mailing
address::**

Phone number::

Fax Number::

E-Mail address::

Representative Information

Representative Customer		
Number::	23387	

Domestic Priority

Information

Application::	Continuity Type::	Parent Application::	Parent Filing Date::
	Divisional	10/314,817	12/09/02
09/528,880	Continuation-in-part of	6,493,567	03/20/00
08/950,244	Divisional	6,041,246	10/14/97

**Foreign Priority
Information**

Country::	Application Number::	Filing Date::	Priority Claimed::

Assignee Information

Assignee name:: Transonic Systems, Inc.

Street of mailing address:: 34 Dutch Mill Road

City of mailing address:: Ithaca

**State or Province of mailing
address::** NY

Country of mailing address:: US

**Postal or Zip Code of mailing
address::** 14850